

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL032062	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 03/26/2015
NAME OF PROVIDER OR SUPPLIER B J'S FAMILY CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 716 HUGO STREET DURHAM, NC 27704		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report by Greg Williams DHSR Construction Section conducted a Biennial Survey on March 26, 2015 from 3:00 pm to 4:30 pm at the above referenced facility. DHSR records indicate the home was first licensed on March 01, 1991 as a Family Care Home for six (6) ambulatory Residents (able to evacuate and respond without any physical or verbal assistance during a fire or other emergency). Based on this information we are requiring the home to maintain compliance with the following: the 1991 Family Care Homes Minimum and Desired Standards and Regulations, the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1991 North Carolina State Building Code - Section 513.1, Exception 1 - Residential Care Homes. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
C 117	Have Current San. And Fire Safety Approvals SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (n) The home shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: 1. At the time of the survey there was not a copy of the latest Sanitation and Fire Inspection reports at the facility. Provide a copy of each of these reports to DHSR Construction Section with your signed Plan of Correction.	C 117	Sanitation and Fire inspection report is completed properly	5/15/15

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

B J'S FAMILY CARE HOME

716 HUGO STREET
DURHAM, NC 27704

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C 153	<p>Houskeeping And Furnishings-Clean, Repaired</p> <p>SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS</p> <p>(a) Each family care home shall:</p> <p>(1) have walls, ceilings, and floors or floor coverings kept clean and in good repair;</p> <p>(2) have no chronic unpleasant odors;</p> <p>(3) have furniture clean and in good repair;</p> <p>(e) This Rule shall apply to new and existing homes.</p> <p>This Rule is not met as evidenced by:</p> <p>1. The facility had recently found bedbugs in Residents Bedroom #1 (front left) and Residents Bedroom #4 (back left) staff stated tht they had self treated the bedrooms, replaced the mattress's and box springs in those two rooms.</p> <p>The facility is in violation of sanitation regulations in accordance with DENR Form 2094 Section 14 Vermin Control /Premises: Outside openings effectively screened or otherwise protected against entrance of flying insects, and flying insects absent; effective control of rodents and other vermin; approved pesticides properly used; premises neat, clean, drained and free of litter and vermin harborages and breeding areas.</p> <p>Have a Licensed pest control contractor to treat the facility for bedbugs. In addition install passive bedbug traps on all beds and zipped mattress enclosures. Move all beds away from walls and keep all linens and laundry away from the floor. Provide a detailed plan on intake procedures for new residents and all preventive measures that will be taken to prevent bed bugs from being brought into the facility. Contact DHSR Construction when all the required items are in</p>	C 153	<p>CONSTRUCTION SECTION</p> <p>MAY 18 2015</p> <p>RECEIVED</p> <p><i>Have replace screens 5/15/15</i></p> <p><i>Will have a licensed pest control contractor to treat the facility 5/23/15 for bed bugs.</i></p>	

the roof. Have the the leaves removed from the roof and provide documentation to our office when corrected.

3. There was a car parked on the left side of the facility, in front of the garage doors that appears to have been abandoned and sitting there for some time. If the car is operable have the car cleaned up, put air in the tires or remove the vehicle from the facility, in its current state it is a harborage for pest (snakes, rodents, insects etc.). Provide documentation to our office when corrected.

2 Has cleaned up and
remove leaf buildup 5/15/15
will send pictures

3. Has wash, clean
and pumped or put 5/15/15
air in the tires